

Appl. No. 10/820,548  
Response to Office Action of March 3, 2005



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Eugene Jarvis  
Appl. No.: 10/820,548  
Conf. No.: 8369  
Filed: April 8, 2004  
Title: METHOD OF PLAYING SINGLE OR MULTIPLE HAND TWENTY-ONE  
CARD GAME  
Art Unit: 3714  
Examiner: Alex P. Rada  
Docket No.: 114066-010

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

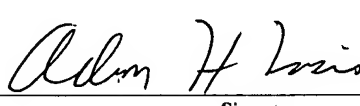

**RESPONSE TO OFFICE ACTION**

Sir:

In response to the Office Action dated March 3, 2005, and in accordance with the personal interview courteously granted on April 19, 2005, please amend the above-identified patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 18 of this paper.

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b> Applicant(s): Eugene Jarvis et al.					Docket No. 0114066-010	
Application No. 10/820,548	Filing Date April 8, 2004	Examiner Alex P. Rada	Customer No. 29159	Group Art Unit 3714	Confirmation No. 8369	
Invention: <b>METHOD OF PLAYING SINGLE OR MULTIPLE HAND TWENTY-ONE CARD GAME</b>						
<b>COMMISSIONER FOR PATENTS:</b>  Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	62 -	62 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	6 -	6 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 02-1818 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 _____ Signature			Dated: May 13, 2005			
Adam H. Masia, Reg. No. 35,602 BELL, BOYD & LLOYD LLC P.O. Box 1135 Chicago, Illinois 60690-1135 (312) 807-4284			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on May 13, 2005 _____ (Date)  _____ Signature of Person Mailing Correspondence Renee M. Street _____ Typed or Printed Name of Person Mailing Correspondence			
CC:						